	Depar	tment of F Division	of E	c He nvii	alth onm	an en	d Social tai Heaitl	Services h					
Food Establishm					t In	SI	pection	Report		Page	1	_ of _;	2_
INSPECTION RSN TYPE GRA	DE INSPECT	INSPECTION DATE			ABLIS	ΗN	MENT NAME						
Regular	_	C / 2 / 18 PALMS MARKET TIME IN TIME OUT PERMIT HOLDER											
Follow-up V Complaint RATI	A	10:32 Y					C Doc	- A					
		PERMIT NO					~ FOR	-37 ()	PL				
Other:	170000927			WUSSTIG POAD YIGO GUAM									
ESTABLISHMENT TY		TELEPHO		No.	of Risk	Fa	actor/Interve	ntion Violations	-	- Contract	RISK C	ATEG	ORY
RETAIL		(453-5	96	No.	of Rep	eat	Risk Facto	r/Intervention Violation	ns			2	
	ORNE ILLNESS R										IS		
Ci	rcle designated compliance (IN,	OUT, N/O, N/A	() for ea	ach nu	mbered	ite	m, Mark "X"	in appropriate box for Co	OS and/or			-0-100	
Compliance Status	in compliance N/O = Not obse						liance Stat		Repeat V	iolation P	TS = De	smerit p	
	Supervision				500	10		Potentially Hazardou				9 11	
1 IN OUT Person	98		6	16			N/O Proper cooking time N/O Proper reheating pro					6	
65	edge, and performs duties Employee Health				18			NO Proper cooling time a			9	+-	6
	ement awareness; policy preser			6	19	111	N OUT N/A	N/O Proper hot holding te	mperatur	88		0.50	6
	use of reporting, restriction & ex ood Hyglenic Practices	xclusion	_	6	20		N OUT NA	Proper cold holding t N/O Proper date marking					6
Proper	eating, tasting, drinking, beteloo	ut, or	Т		41		N OUT N/A		Service State				6
4 IN OUT N/A N/O tobacc	o use			6				Consumer	Advisor	У	10,2		
					00	T.		Consumer Advisory	Consumer Advisory provided for raw or				
The state of the s	Preventing Contamination by Hands N/A N/O Hands clean and properly washed			6	22	ľ	N OUT N/A	undercooked foods					6
	e hand contact with ready-to-eat	foods or		6		100		Highly Susceptib	le Popu	lations	250000		
approv	ed alternate method properly foli ate handwashing facilities suppli		-		23	IN	N OUT N/A	Pasteurized foods us	ed; prohil	oited foods r	not		6
8 IN OUT RCCESS		eu a	X	6	655	1		offered Chem	ical				_
	Approved Source			uS.	24	Tin	N OUT N/A	Food additives: appro		nmnacht ties	, T	T	6
The same of the sa	btained from approved source			6	27	T							T,
	scaived at proper temperature regood condition, safe, and unad	lulterated		6	25	IN	TUO N	Toxic substances pro	perly ider	itified, store	d,		6
	ed records available: shellstock		\vdash	6		1	C	onformance with Ap	proved	Procedur	98		-
parasite destruction						IN	N OUT N/A	Compliance with vari	ance, spe			T	6
	ction from Contamination eparated and protected			6				process, and HACCF) plan				
14 IN OUT NA Food o	ized		6				are improper practices of stributing factors of foodb						
I IN UUI	disposition of returned, previous reconditioned, and unsafe food			6				are control measures to					
301400	recordingled, and unsale lood	GOOD	RET	All	PR	Āζ	CHICES						
Good F	Retail Practices are preventative	measures to co	ontrol th	ne intra	duction	ı of	pathogens, c	hemicals, and physical of	ojects into	foods.			
Mark "X" in box: If numbers Compliance Status	d item is not in compliance and/	or if COS and/o	R	COS	=Сопе	clec	d on-site durir Ilance Stati	ng inspection R =Repe	at violatio	PT8 =	Demerit	S R	
	Safe Food and Water	1000		110	001	пр	nance State	Proper Use of	of Utens	ils	100.	9 1	IFIC
27 Pasteurized eggs us	ed where required			1	40	T		ensils: properly stored		00-			1
Water and Ice from approved source				2	41	П	Utensils,	equipment and linens; p	roperly sto	ored, dried,			1
29 Variance obtained for specialized processing methods			\vdash	1	42	1		se/single-service articles:	properly :	stored, used		-	1
Food Temperature Control					43		Gloves u	sed properly					1
Proper cooling methods used; adequate equipment for temperature control				1	-	Т	Food and	Utensils, Equipme					00000
31 Plant food properly cooked for hot holding				1	Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used							1	
32 Approved thawing methods used				1	45	T	Warewa:	shing facilities: Installed, a	maintaine	d, used; test	1		1
33 Thermometer provided and accurate				1	46	+		contact surfaces clean				+	1
	Food Identification					_		Physical F					
34 Food properly labele	d; original container tion of Food Contaminatio			1	47	-		ld water available, adequa			_	-	2
THE RESERVE THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED IN COLUMN TWIND TWO IS NAMED IN COLUMN TWO IS NAMED IN COLUMN TWO IS NAMED IN	animals not present	711		2	49	_		and wastewater properly				+-	2
20	nted during food peparation, sto	rage &		1	50	T		ilities: property constructe		ed. & cleane	ed -		2
37 Personal cleanliness		220	-	1	51	+	_	refuse properly disposed			-	+-	2
38 Wiping cloths: properly used and stored				\dashv	52	t		facilities installed, mainta			-	+	1
39 Washing fruits and vegetables 1						İ		ventilation and lighting;	designate	d areas use			1
	nderstand the above viola				-	_	Ic.	Documents an				exa.c	
Personyly Charge (Print and Sign	orrective measures that s	man de take	en.		54	1_	Sanitary	Permit, Health Certificate Date:	s valid an	a posted	-	1 /	2
A. C. CRO											6/	2//	18
DEH Inspector (Print and Sign) J. GARCIA EP	10 1 / T. SMIA	VSIM	EP	Mo	1			Follow-up (Circle one)	YES	NO	Follow-	up Dat	10
Rev: 08.27.15	in	White: DPHS!		and the last of th	-	d Ee	tablishment				10		
V													

-1 -0		Depa		ublic Health a of Environme	and Social Services ental Health				
	3 1	Food	Establis	shment In	spection Rep	ort	Page 2	2 of <u>Z</u>	
	HMENT NAME	-		LOCATION	•				
	MS MARKE	SANITARY PER	PMIT NO	WUSST		YIGO GU	AM		
	4 / 12 / 18 17000927			GUAM SAVECO OUTLET INCORPORATED					
			TEMPERAT		ERVATIONS				
	Item/Location	on	Tempera	iture (° F)	Item/Loca	ition	Tempe	erature (° F)	
									
						· · · · · · · · · · · · · · · · · · ·			
	· · · · · · · · · · · · · · · · · · ·								
-									
ITEM NO.		OBSER	VATIONS	AND CORF	RECTIVE ACTIO	NS		CORRECT BY DATE	
Violation	s cited in this rep	ort must be co	rrected with	in the time fr	ames indicated, or	as stated in Se	ections 8-4	05.11 and	
	Λ 5011	1-1-5		f the Guam F					
	A FOLLOW-UP INSPECTION WAS CONDUCTED. PREVIOUS								
	INSPECTION	1 CONDUC	CTED OF	1 5/2	118 (16,E	<u>。</u>			
	THE FOLLOW	-1 11-1-0							
	THE FOLL	WING N	IAS OBS	SERVED	*				
	- ~~-								
	THE PREVIOUS VIOLATIONS WERE CORRECTED (ITEMS # 2 33								
	44,46 2	52.)							
	To colum	10 5 5							
-	THE FOLLOV	VING KEP	EAT VIO	LATIONS	REMAIN:				
8	110 1107	· Arris							
0					ANDWARH ST.		ECT POC		
	1 4	S SHALL E	E PROVI	DED TO	PROMOTE	PROPER	HANDM	4874	
	HYGIENE.								
	£4+1-10 18	1,=	A						
	FATING 18	HEREBY	DOWNO	3RADED	FROM "B"	To "c"			
	DUE TO PEPEAT VIOLATIONS.								
	"B" PLACAPD # 01014 PEMOVED.								
	"C" PLACARD # 00974 ISSUED.								
	LETTER UF	- MASHIN	G 1550	ED.					
			15 0						
esed on the	PIC BRIEFED	ns listed above identi	y violations which	shall be corrected	by the date specified by t	ne Department, Failu	re to comply ma	av nestult in	
e immediate	suspension of the Sanit he Director within the pe	ary Permit or downgr	ade. If seeking to	appeal the result of	f any notice or inspection i	Indings, a written req	uest for hearing	g must be	
erson in Cha	rge (Print and Sign)			. dell'addona.		Date	11/10	110	
	(Print and Sign)	7				Dat	P[[7]	8)	
	ARCIA EPH			MIZU E			6/12/	18	
Rev:	08.27.15	い	White: DPH\$57DE	H Pollow: Food	l Establishment				

GOVERNMENT OF GUAM

DEPARTMENT OF PUBLIC HEALTH AND SOCIAL SERVICES DIPATTAMENTON SALUT PUPBLEKO YAN SETBISION SUSIAT



EDDIE BAZA CALVO

LIEU

GOVERNOR	ACTING DIRECTOR						
RAY TENORIO JTENANT GOVERNOR							
JIENAM GOVERNOR	6/12/12						
	Date: 6 (12 / 18						
	9						
PALMS MARKET Name of Establishment							
Name of Establishment							
As a result of this inspection your establishment received a	i						
/	, 1						
LETTER OF WARNING	- 6/C						
	(Demerit/Grade Points)						
Once you have corrected all violations cited on your establishment's inspection report, you must provide us a written request for re-inspection to include a description of the corrective measures that you have implemented. If we do not receive a written re-inspection request from you, we will conduct a follow-up inspection after ten (10) calendar days from the official receipt of this notice to ensure that corrective measures have been taken.							
Failure to correct violations may result in the of 10GCA, Chapter 21.	closure of your establishment pursuant to section 21109(b) of						
□ Norman on at occupa							
☐ NOTICE OF CLOSURE	(Demerit/Grade Points)						
	,						
written request for re-inspection to include a des Unlike an establishment who has received a let written request for re-inspection is made. Under may be imposed until the violation is correct Environmental Health within five (5) calendar	your establishment's inspection report, you must provide us a cription of the corrective measures that you have implemented, ter of warning, an establishment shall remain closed unless a 10 GCA Ch. 21 §21109(b), suspension without prior hearing ted. You may also request a hearing to the Division of days of the date of this notice. When a hearing is requested it shall be discretionary with the Director as to whether the g.						
We look forward to working closely with you as partners assistance, you can reach us at 735-7221 or (fax) 734-5556.	in promoting health and sanitary practices on Guam. If you need further . Si Yu'us Ma'ase,						
	Sincerely. FOR Ju.						
ACTING	Director						
Issued By: J. GARCIA T. SHI MIZ Name of EPHO 123 CHAI ANKARE	Establishment Representative						
	TA, MANGILAO, GUAM 96913-6304 1.: 1.671.735.7102 • Fax: 1.671,473.5910						